



Salt Lake City

May 6, 2006



Citizens' Health Care Working Group

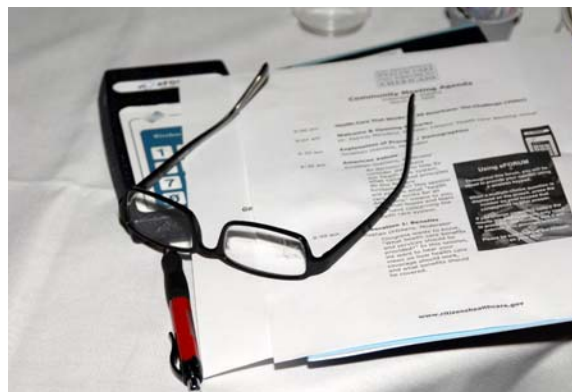
HEALTH CARE
THAT WORKS FOR ALL
AMERICANS

OVERVIEW

Encouraged by both of their U.S. Senators – Orrin Hatch and Robert Bennett – to tackle the health care problems facing the nation, participants at the Salt Lake City community meeting balanced the concepts of fairness and individual responsibility in their effort to address the complexity and inefficiency in the current health care system.

They recognized that everyone should have access to basic health care, and expressed their frustration that getting care often requires “luck, a relationship, money and perseverance.” However, participants acknowledged that they would have to make a contribution as well. A number pointed to several potential solutions that would engage and empower the consumer in order to slow the growth of health care costs. At the same time, participants called for more transparency in pricing to improve understanding and control on behalf of the consumer.

Those in the meeting felt that addressing efficiency and access would have a positive overall impact on decreasing costs. When ranking proposals for how to reduce costs, participants at the Salt Lake City meeting listed “requiring that all Americans enroll in basic health care coverage, either private or public” as their top choice. In support of the concept, one participant remarked that “in our conservative area, it goes against the grain to require people to do things. But we require auto insurance and people are OK with that.”



**Citizens' Health Care Working Group
Community Meetings**

Kansas City, Missouri
Orlando, Florida
Baton Rouge, Louisiana
Memphis, Tennessee
Charlotte, North Carolina
Jackson, Mississippi
Seattle, Washington
Denver, Colorado
Los Angeles, California
Providence, Rhode Island
Miami, Florida
Indianapolis, Indiana
Detroit, Michigan
Albuquerque, New Mexico
Phoenix, Arizona
Daytona Beach, Florida
Upper Valley, New Hampshire
Hartford, Connecticut
Des Moines, Iowa
Philadelphia, Pennsylvania
Las Vegas, Nevada
Eugene, Oregon
Sacramento, California
Billings, Montana
San Antonio, Texas
Fargo, North Dakota
New York, New York
Lexington, Kentucky
Little Rock, Arkansas
Cincinnati, Ohio
Sioux Falls, South Dakota



Salt Lake City, Utah

SESSION FINDINGS

Values

Every citizen has a basic right to have basic health care and it can't be based on the type of job they have.

Over 90 percent of the participants at the meeting felt that the health care system in the U.S. has major problems or is in a state of crisis. The majority of individuals (72 percent) responded that the most important reason to have health insurance is to protect against high medical expenses, rather than to pay for everyday medical costs.

When participants began discussing what values should be fundamental to a health care system, the concepts of equality and fairness emerged strongly. Over half of the individuals expressed a desire to have “appropriate, affordable, accessible health care for everyone” and “equal access to care and equal treatment.” A quarter of the participants valued “basic health care as a human right,” prioritizing “universal coverage up front for everyday services that is affordable.” Other values included access to early intervention and prevention as well as transparency in pricing and financing. The majority of the participants felt it should be public policy, a stated public goal set out in either federal or state law, that all Americans have affordable health care coverage (77 percent).

As we consider ways to improve our health care system, what values and/or principles do you believe are fundamental?

(Top 5 responses)

- Equal access to care and equal treatment (equal quality, fairness)
- Appropriate, affordable, accessible health care for everyone
- Basic health care as a human right
- Early intervention and prevention
- Transparency in pricing / financing

Benefits

I don't have a problem with that basic package of health care services. But I have a problem saying that should be covered at 100% for everyone. That's something that we, as a society, cannot afford.

The concept of fairness resurfaced in the discussion of benefits, both in terms of access to care and the contributions that individuals make for that care. Over 80 percent of participants preferred a health care system which provided everyone with a defined set of benefits as opposed to a system of categorical coverage. Their frustrations with the current system, which uses categories of people to determine coverage, included the “loopholes,” the decline in the number of employers offering coverage and concerns about the impact of the health care burden on the ability of companies to compete globally. They voiced a desire for everyone to contribute financially to a health care system, recognizing that “individuals need a connection between the services provided and the money I’m paying for those services myself.”

When asked who should be involved in determining what benefits should be included in a basic package, Salt Lake City participants prioritized the involvement of consumers and health care professionals, followed in descending order by state and local government, the federal government, employers and insurance.

Getting Health Care

You can't get through this system without luck, a relationship, money and perseverance.

Many of the frustrations and difficulties that people had encountered in getting health care had to do with things they saw as interfering with the "patient-provider" relationship. Barriers included the cost of care, the complexity of the current system, lengthy waiting times and long distances to access specialists. Participants saw the complexity in the current system as an unnecessary barrier, and were frustrated that it takes "luck, a relationship, money and perseverance" just to navigate the current system. They desired simplicity and security in their care, citing the lack of portability as a significant concern. Individuals emphasized that they were being "priced-out" of the current system, saying that costs were going up so much they were opting to drop out of the system entirely.

In getting health care, what is most important to you?

- Efficiency or value (cost divided by result)
- Quality care
- Access to timely, appropriate care
- Choice of quality provider based on good data
- No interference in doctor - patient relationship (no insurance companies)
- Understanding how to navigate the system

Financing

I know in our conservative area, it goes against the grain to require people to do things. But we require auto insurance and people are ok with that.

Once again, participants reiterated their desire to make health care fair and accessible for all and recognized that everyone has a level of responsibility for their health care. The majority of individuals thought everyone should be required to enroll in basic health care coverage, either public or private (81 percent). They recognized that society could not afford to provide all health care services to everyone, but felt basic care should be accessible to all Americans. Participants noted that when people do not participate in the system, others bear the burden of their costs. There was clapping and vocal agreement when a participant said everyone should participate because the "invincibles" or those that choose not to participate, "always end up in the ER and we pay for them anyway." They agreed that if people opt out of enrolling in a system, "they should be held responsible for the costs of their care." Participants recognized that "in our conservative area, it goes against the grain to require people to do things. But we require auto insurance and people are ok with that."

What steps are the most important to take in order to slow the growth of health care costs in America?

(In priority order from highest to lowest)

- Increase pricing transparency of procedures
- Eliminate direct-to-consumer advertising for pharmaceutical companies
- Education in schools, church, communities about health care
- More involvement of other health care professionals apart from medical doctors, in particular screening
- Engage the consumer in cost of delivering services; make them directly responsible
- Eliminate inefficiencies in system, in particular medical records
- Tort reform
- Single-payer system
- Place a cap on catastrophic surgeries

When the discussion focused on how to finance health care, around 80 percent of participants thought some people should pay more than others. Over half of the group felt the determination should be based on income, but around a quarter of the group thought that health behaviors should also be taken into consideration. Participants also revealed their preference to purchase insurance directly from an insurance company, or have it provided by the government. Less than 20 percent preferred to receive their health insurance from their employers. When asked if public policy should continue to use tax rules to encourage employer based health insurance, the audience was fairly evenly split on the topic with 53 percent in favor and 47 percent opposed.

Tradeoffs and Options

Are we willing to concede that there are people that will continue to suffer from the capitalistic society and the profits involved?

Participants recognized their ability to be part of a solution and offered suggestions on what they viewed were the responsibilities of individuals and families in the health care system. They saw a responsibility for the consumer to participate at some level in the payment for health care services in order to increase awareness of the cost of the services they are utilizing. They acknowledged that the majority of health care costs in Utah are generated by a small percentage of the population, but still felt that there should be an increase in health education across the board. Education should be focused on healthy behaviors in an effort to increase early intervention and prevent costly problems, in addition to end of life issues. They suggested that people be held financially accountable for unhealthy lifestyle choices. Participants also agreed on the need to communicate health care difficulties to their representatives, saying that members of Congress “all have access to the benefits and services that are difficult for everyone else to get. They don’t stay up at night thinking about how to get care for a sick child or how to pay for their spouse’s care.”

They pointed out that the question of responsibilities “assumes that everyone has the capability to take responsibility and we need to make sure that we remember that there are some people without those capabilities.”

Participants discussed what could be done to slow the growth of health care costs in the current “bloated and inefficient” system. They felt eliminating direct to consumer advertising for pharmaceuticals, increasing price transparency and engaging consumers in the cost of delivering services would have a high level of impact on costs. In terms of feasibility, they listed “education in schools, churches and communities about health care” and the increased involvement of other health care professionals as steps that could be easily implemented.

Participants noted the impact that electronic medical records could have in reducing the inefficiencies and costs in the current system, saying “If we had better records,

Public spending priorities on health and health care in America

(Top 3 choices)

- Investing in public health programs to prevent disease, promote healthy lifestyles, and protect the public in the event of epidemics or disasters
- Preserving Medicare & Medicaid
- Guaranteeing that all Americans get health care when they need it, through public safety net” programs (if they can not afford it).”

electronic records, we could have better data as a society that could lead to better decision making.”

The majority of participants (80 percent) were willing to increase their personal financial contribution to a health care system that would result in every American having access to health care coverage and services.

When asked about public spending priorities, participants favored the investment in public health programs to prevent disease, promote healthy lifestyles and protect the public in the event of epidemics or disasters. They valued the preservation of Medicare and Medicaid. They recognized the importance of guaranteeing that all Americans get health care when they need it, through public safety net programs (if they can not afford it otherwise) and also emphasized the need for enough health care providers, particularly in rural and inner city areas. They thought it was important for all Americans to have health insurance.

“Requiring that all Americans enroll in basic health care coverage, either private or public” was listed as the top choice for ways to ensure access to health care. They saw value in expanding neighborhood health clinics. The third highest proposal for the Salt Lake City meeting was to “create a national health insurance program, financed by taxpayers, in which all Americans would get their insurance.” They also thought it would be helpful to increase the flexibility afforded to states in how they use federal funds for state programs to maximize coverage.

METHODOLOGY

The meeting format was a combination of table-level and full audience discussions. Attendees to this meeting participated in table-level discussions (10 participants per table), assisted by the table facilitator, and reported their findings to the entire audience. The attendees also participated in moderated discussions involving the larger group and expressed their opinions to survey questions electronically through keypads. During the full group discussions, key points raised by individuals and tables were compiled and displayed on the screens. Participants then used their key pads to answer questions or rank options and the results were displayed as received. Findings from these instant polls formed the basis for additional full group discussion. Additional information from this meeting is available at www.citizenshealthcare.gov by selecting “Completed Community Meetings” and “Salt Lake City.”

PARTICIPATION

Over one hundred Utahans gathered on Saturday, May 6, 2006, at the Salt Lake City Marriott Downtown, to talk about the status of health care in the United States. Senator Orrin Hatch and Senator Bob Bennett welcomed their constituents to the meeting, thanking them for participating in this effort to find solutions to make health care work for all Americans. Also present was Kent Michie, Utah Insurance Commissioner, and representatives from the Governor's staff. Senator Hatch, who sponsored the legislation that created The Citizens' Health Care Working Group, informed participants that next year, as either the Chair of the Finance Committee or Ranking Member, one of his priorities in that leadership position would be to "drive through and get something done" in health care. He recognized this Working Group's ability to "give us the tools and the understanding that we need to come up with the solutions." Senator Hatch told the participants, "I'll push through legislation if you'll do your part and come up with thoughtful recommendations."

Dr. Brent James and Richard Frank represented the Working Group at this meeting.

DATA

Are you male or female?

45.9%	1	Male
54.1%	2	Female

How old are you?

1.2%	1	Under 25
29.3%	2	25 to 44
58.5%	3	45 to 64
11.0%	4	Over 65

Are you Hispanic or Latino?

5.9%	1	Yes
89.4%	2	No
4.7%	3	No Response

Which of these groups best represents your race?

84.0%	1	White
2.5%	2	Black or African American
3.7%	3	Asian
0.0%	4	Native Hawaiian or Pacific Islander
2.5%	5	American Indian or Alaska Native
1.2%	6	Other
6.2%	7	Decline to answer

What is the highest grade or year of school you completed?

0.0%	1	Elementary (grades 1 to 8)
1.2%	2	Some high school
4.8%	3	High school graduate or GED
20.2%	4	Some college
3.6%	5	Associate Degree
25.0%	6	Bachelor's Degree
45.2%	7	Graduate or professional degree
0.0%	8	Decline to answer

What is your primary source of health care coverage?

68.7%	1	Employer-based insurance
10.8%	2	Self-purchased insurance
1.2%	3	Veterans'
7.2%	4	Medicare
4.8%	5	Medicaid
2.4%	6	Other
4.8%	7	None
0.0%	8	Not sure

What is your employment status?

21.2%	1	Self-employed
57.6%	2	Employed - working full time
7.1%	3	Employed - working part-time
0.0%	4	Not employed / currently looking for work
3.5%	5	Homemaker
10.6%	6	Other

Which one of these statements do you think best describes the U.S. health care system today?

51.9%	1	It is in a state of crisis
38.3%	2	It has major problems
6.2%	3	It has minor problems
0.0%	4	It does not have any problems
3.7%	5	No opinion

Which one of the following do you think is the MOST important reason to have health insurance?

25.6%	1	To pay for everyday medical expenses
72.1%	2	To protect against high medical costs
2.3%	3	No opinion

As we consider ways to improve our health care system, what values and/or principles do you believe are fundamental? And which of the following values/principles is most important to you?

10.1%	1	Early intervention and prevention
6.3%	2	Universal coverage (covering up-front, everyday services, and affordable)
24.1%	3	Equal access to care and equal treatment (equal quality, fairness)
27.8%	4	Appropriate, affordable, accessible health care for everyone
3.8%	5	Balance cost and benefit
17.7%	6	Basic health care as a human right
8.9%	7	Transparency in pricing/financing
0.0%	8	Make access culturally and linguistically appropriate
0.0%	9	Benevolence towards every member of the community
1.3%	10	Patients should have more control of their choices

Should it be public policy that all Americans have affordable health care coverage? [By public policy we mean that the stated public goal is set out in federal or state law.]

77.2%	1	Yes
22.8%	2	No

Which of the following statements most accurately represents your views?

18.7%	1	Providing coverage for particular groups of people (e.g. employees, elderly, low-income, etc.) as is the case now
81.3%	2	Providing a defined level of services for everyone (either by expanding the current system or creating a new system)

On a scale of 1 (no input) to 10 (exclusive input), how much input should each of the following have in deciding what is in a basic benefit package?

4 th	4.649	Federal government
3 rd	4.671	State and/or local government

2 nd	4.946	Medical professionals
6 th	2.568	Insurance companies
5 th	3.080	Employers
1 st	6.833	Consumers

What kinds of difficulties have you had in getting access to health care services? And which of these kinds of difficulties is the most important to address?

		Inability to navigate the system without luck, a relationship, money and
--	1	perseverance
--	2	Cost, Culture, Language, Education
--	3	Had no difficulty getting access
--	4	Red tape and accessing special benefits
--	5	Insufficient reimbursement
--	6	Assumptions
--	7	Being medically uninsurable inhibits access to care
--	8	Insufficient number of physicians
--		Portability of coverage job-to-job (a condition covered at one job becomes a pre-
--	9	existing condition for the next job)
--	10	Access for underrepresented/underserved populations

In getting health care, what is most important to you?

--	1	Efficiency or value (cost divided by result)
--	2	Quality care
--	3	Access to timely, appropriate care
--	4	Choice of quality provider based on good data
--	5	No interference in doctor - patient relationship (no insurance companies)
--	6	Understanding how to navigate the system

Should everyone be required to enroll in basic health care coverage - either private or public?

81.0%	1	Yes
19.0%	2	No

Should some people be responsible for paying more than others?

80.0%	1	Yes
20.0%	2	No

What criteria should be used for making some people pay more?

8.5%	1	None - everyone should pay the same
4.2%	2	Family size
22.5%	3	Health behaviors
59.2%	4	Income
5.6%	5	Other

Who would you prefer to provide you with health insurance?

17.6%	1	An employer
27.0%	2	The government
36.5%	3	You purchase it directly from an insurance company
10.8%	4	Other
8.1%	5	Don't know

Should public policy continue to use tax rules to encourage employer-based health insurance?

52.8%	1	Yes
47.2%	2	No

What responsibilities of individuals and families in the health care system would you support most?

--	1	Be educated on how to promote healthy lifestyle; informed consumer
--	2	Consumer should always have a (reasonable) financial stake in each medical point of contact
--	3	Pay increases in taxes
--	4	People should be held financially accountable for unhealthy lifestyle choices
--	5	Contribute to Health Savings Accounts (HSA's)
--	6	Become involved in communicating with government about the severity of the problem
--	7	Participate in system; make family plans, esp. with end-of-life issues
--	8	Ration care (e.g. stamp use in WWII)

Which of these steps is the most important to take in order to slow the growth of health care costs in America? Please rate the following on a scale from 1 (low impact) to 10 (high impact)

3 rd	6.714	A - Engage the consumer in cost of delivering services; make them directly responsible
7 th	6.265	B - More involvement of other health care professionals apart from medical doctors, in particular screening
4 th	6.493	C - Single-payer system
9 th	5.449	D - Place a cap on catastrophic surgeries
2 nd	7.167	E - Increase pricing transparency of procedures
1 st	7.522	F - Eliminate direct-to-consumer advertising for pharmaceutical companies
6 th	6.400	G - Eliminate inefficiencies in system, in particular medical records
5 th	6.457	H - Education in schools, church, communities about health care
8 th	6.059	I - Tort reform

Which of these steps is the most important to take in order to slow the growth of health care costs in America? Please rate the following on a scale from 1 (low feasibility) to 10 (high feasibility)

6 th	6.119	A - Engage the consumer in cost of delivering services; make them directly responsible
3 rd	6.754	B - More involvement of other health care professionals apart from medical doctors, in particular screening
8 th	5.338	C - Single-payer system
9 th	5.299	D - Place a cap on catastrophic surgeries
1 st	7.183	E - Increase pricing transparency of procedures
5 th	6.597	F - Eliminate direct-to-consumer advertising for pharmaceutical companies
4 th	6.612	G - Eliminate inefficiencies in system, in particular medical records
2 nd	7.182	H - Education in schools, church, communities about health care
7 th	5.955	I - Tort reform

How much more would you personally be willing to pay in a year (in premiums, taxes, or through other means) to support efforts that would result in every American having access to affordable, high quality health care coverage and services?

22.8%	1	\$0
13.9%	2	\$1 - \$100

20.3%	3	\$100 - \$299
25.3%	4	\$300 - \$999
11.4%	5	\$1,000 or more
6.3%	6	Don't know

On a scale from 1 (low) to 10 (high), please rate each of the following public spending priorities to reach the goal of health care that works for all Americans.

4 th	7.535	Guaranteeing that there are enough health care providers, especially in areas such as inner cities & rural areas
1 st	8.581	Investing in public health programs to prevent disease, promote healthy lifestyles, and protect the public in the event of epidemics or disasters
5 th	7.417	Guaranteeing that all Americans have health insurance
T-6 th	7.099	Funding the development of computerized health information to improve the quality & efficiency of health care
8 th	6.657	Funding programs that help eliminate problems in access to or quality of care for minorities
T-6 th	7.099	Funding biomedical & technological research that can lead to advancements in the treatment & prevention of disease
3 rd	7.579	Guaranteeing that all Americans get health care when they need it, through public safety net" programs (if they can not afford it)."
2 nd	7.831	Preserving Medicare & Medicaid

If you believe it is important to ensure access to affordable, high quality health care coverage and services for all Americans, which of these proposals would you suggest for doing this? Please rate each of the following proposals on a scale from 1 (low) to 10 (high).

6 th	5.544	Offer uninsured Americans income tax deductions, credits, or other financial assistance to help them purchase of private health insurance on their own.
7 th	5.342	Expand state government programs for low-income people (eg. Medicaid & S-CHIP) to provide coverage for more people without health insurance.
9 th	4.351	Rely on free-market competition among doctors, hospitals, other health care providers and insurance companies rather than having government define benefits and set prices.
5 th	6.013	Open up enrollment in national federal programs like Medicare or the federal employees' health benefit program
8 th	5.155	Expand current tax incentives available to employers & their employees to encourage employers to offer insurance to more workers & families
10 th	3.714	Require businesses to offer health insurance to their employees
2 nd	6.986	Expand neighborhood health clinics
3 rd	6.575	Create a national health insurance program, financed by taxpayers, in which all Americans would get their insurance
1 st	7.118	Require that all Americans enroll in basic health care coverage, either private or public
4 th	6.090	Increase flexibility afforded states in how they use federal funds for state programs (such as Medicaid and S-CHIP) to maximize coverage

STAYING INVOLVED

Through the Citizens' Health Care Working Group website, we have made it possible for you to stay involved in the discussion – and to encourage others to get involved as well. Visit the website at www.citizenshealthcare.gov and:

- Download a **Community Meeting Kit** to plan a meeting for your family, friends, neighbors and co-workers.
www.citizenshealthcare.gov/community/mtg_kit.php
- Find a list of other cities hosting meetings and spread the word to friends and family in those cities to **Register for a Community Meeting** near them.
www.citizenshealthcare.gov/register
- Add your opinions to three different polls in the **Public Comment Center**
www.citizenshealthcare.gov/speak_out/comment.php
- Read what members of the Working Group and other Americans have to say by following the link on the homepage to the **Citizens' Blogs**.
www.citizenshealthcare.gov
- Share your opinions on the future of health care by creating your own blog by following the link on the homepage to the **Citizens' Blogs**.
www.citizenshealthcare.gov
- Join a growing group of individuals engaging in back-and-forth discussions on the **Discussion Forums** by following the link on the homepage.
www.citizenshealthcare.gov
- Read **Community Meeting Reports** from other cities to see how opinions are shaping up across the country.
www.citizenshealthcare.gov/community/mtng_files/complete.php
- Stay tuned to the homepage for the Citizens' Health Care Working Group **Preliminary Recommendations** (available in early June) and get involved in the 90-day public comment period.
www.citizenshealthcare.gov
- Stay tuned to the homepage for information on the **Final Recommendations** and the schedule of **Congressional hearings** to address those recommendations.
www.citizenshealthcare.gov

If you have additional ideas on how to get others involved, we would love to hear them. Please contact Jessica Federer at 301-443-1521 or jessica.federer@ahrq.hhs.gov.